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## THE FIRST YEARS OF PRACTICE.

[The address to the graduating class of the New York Medical College, by Dr. Frank Tuthill, one of the Censors, and more extensively known of late as one of the editors of the New York Daily Times, is published in full in the columns of that paper. We select some portions of it for the perusal of our readers, as the address may be read with interest and profit not only by the young graduates of New York, but by practitioners of all ages and in other places.]

Dr. Tuthill congratulated the graduates upon the honors, rights and privileges to which they had attained. They had swam a river whose depth was not vouchsafed them, nor its width more than guessed at. Like poor Christian, they had climbed the hill Difficulty, and, whether frightened or not, passed by the lions, which proved to be chained. It cannot but be an occasion of rejoicing, in view of the difficulties overcome. But the laughter ceases without the echo, remembering that there is a valley of Humiliation just ahead, and several Apollyons dripping blue and melancholy hours from their wings, stretching across the pathway. The Apollyons are great cowards, however, before well-furnished men: and this humiliation is wholesome.

A year hence all these terrors of beginning will be matters of mirth. They will seem as ludicrous as the fright of one who has stood shivering and trembling all the dark night on the bank of what seemed a turbulent river, but which proved, by daylight, to be a mere rill rattling, not ankle deep, over its pebbly bed.

A great change has come over them during the hour—for the metamorphosis from the condition of a lively, rollicking, thoughtless medical student, to that of a grave and reverend physician, upon whom are rolled the responsibilities of the life and death of his fellow men, is most marvellous and vital. Whereas, when a student, he gloried in the tenderness of his youth, now he delights in the few marks that age has made upon him. Is there among his locks a whitened hair, tenderly regard it, so arrange the whole that it shall be sure to be observed. Is there a wrinkle or furrow on his face—cultivate it, for with age alone the people think that there is wisdom. And when he leaves his alma mater, and strikes out into the world, how subdued and nervous he seems for awhile!

Sitting in his office, on the exterior of which is nailed the newly-painted shingle which announces his profession, how he looks from book to bottle, from manikin to mortar, shivering lest the step on his stair-case should be a call for him—hoping that it is, yet dreading it. It approaches—a knock—it is only the Squire, called to say how glad he is that a good doctor has come to settle with them. He employs the “old doctor” himself, he says, but he will be glad to have him vaccinate the children, and will do all he can to help him; then, cracking a few stale jokes about the “distressingly healthy state of the village,” leaves, thinking he has left a deal of consolation. When the young doctor makes his first call, how the words, that were wont to rush out so fluently, cling to his opened lips! how he watches the friends about the sick one’s bed! how he looks into the eyes of his patient, seeking sympathy there in his embarrassment! how he envies the imperturbability of the old nurse, sitting at the bed’s head, with a pinch of snuff between thumb and finger, and all the importance of her conscious experience written in her face. No wonder, when he is arranging for his first venesection—no wonder his hand trembles, as he plunges the lancet—for several pairs of eyes are watching him—microscopic eyes that render his trembling into violent shakings. No wonder, when he fixes his forceps at the extraction of his first tooth, he wrenches off the crown, leaving what seem like bottomless roots, still aching in the jaws; for, if there are not half a dozen men standing by to observe how much tact or lack of it he exhibits, yet the reflection that the slightest want of success will, before bed-time, be talked over in parlor and kitchen, apologized for by some of the young and amiable, talked of at the post-office and in the shoe-shop, discussed at tea-tables and at the bar, in the village store, and by the ruddy light that illumines the dusky premises of the swarthy smith. Then, when his first fever case presents itself, how immensely distant, like planets in their orbs, are the critical days!—how the different stages seem to last through ungrown eternities!—how, from day to day, he watches for one change of symptom, almost consenting, at times, that the change should be for the worse, rather than not come at all; how he blames himself for not curing incurables, and that he cannot break fevers; how he anticipates the complaints of friends, complaints they never will utter, and feels that he might almost be treated as an enemy, because his friendship has proved so long unavailing; how tedious is the convalescence; how he thinks that a dozen times the amount of his bill he would gladly pay, to see the invalid walking about again in the fullness of his strength, perfectly cured; how ashamed he grows to be seen visiting the house, and is tempted to reach it by back-ways and by-paths. All this time, the “old doctor,” his rival, swells twice or thrice a-day through the village to the house of a neighbor not half as sick, without exhibiting a trace of care about the tediousness of the convalescence, reckons that she is doing well enough, and to the urgent demand for a medicine to relieve this symptom or to ease that pain, tells them to “wait! Nature is doing the job,” and asks the old farmer, “What is the price of potatoes?” But the young man’s peculiar province it is to chide himself that he cannot break fe-

vers, stay the course of epidemics, set the bed-ridden on their feet, cure chronic rheumatism in a day, and disguise with perfect confidence where old experience would cheerfully confess his ignorance.

But, said Dr. Tuthill, there are some great privileges pertaining to this stage of the doctor's life. The sound of the mortar heard in his room, is to his credit, and it is all the same whether he is grinding spices for his landlady's accommodation, or dried herbs and chemicals for his pills. Seen dimly through his shaded window, peering over a book, they say that he is *studious* and learned, whether the volume he reads is "Bulwer" or "Broussais," "Dickens" or "Dunglison," "Cooper" or "Cooper." Seen writing at his desk, he gets credit for an intelligent student or an author; and it is all the same whether he is making his sparse receipts equal the bill of his expenses upon the balance sheet, noting his cases, or writing a tale for some literary monthly. It is pleasant to see how, if he is grave by nature, his gravity is set down to thoughtfulness, and when, with a long face, he sits building fine castles in the air, they say that he meditates the state of his patients, and is turning over the value of different medicines in their behalf. If he is cheerful and happy, and something of a rattle-head, his presence they say is a tonic, and a few moments of his conversation soothes pain like an anodyne.

These leisure seasons of early practice ought to be appreciated by physicians. It is the time when by reading up the cases that occur, the experience of ancients and moderns may be digested and wrought into his own. If he has an ambition for discovery, he can fit himself for it, by reading up what is already known, and making himself familiar with the lands and the skies already mapped. It is the time for one to arm himself to meet and to vanquish the pretentious humbugs of modern times; most of which have wheeled out the brief circle of their popularity before now—been respected, ridiculed, buried, and now risen again to run the same round.

The wits and the wags, said the doctor, have laid down a great many rules for getting into practice, and generally at the expense of the doctors. "There are two ways, my boy," said Radcliffe to Mead his successor, "for a physician to treat his patients—either to bully or cajole them. I have taken the former course and have done well, as you see. You may, perhaps, take the latter, and perhaps do equally as well." Be careful, say the advising wits, to learn the *form of prescribing*, since form is the main chance. Make your name ring in the town; it little matters how, so only that this point be secured, that when your name is proposed in consultation, there shall be none so ignorant but will confess they have heard it. Buy a mountain of books, and be sure that none of them be left in secluded parts of your house. Or, if you have not the money to buy the mountain, let the few do good service, even as our famous Yankee General Putnam made his lean score of soldiers march up over the verge of the hill so often that the terrified enemy reported a force of many hundred strong; and never omit mere mention, where it will tell, of "the library" from which these are brought out for immediate use, it being altogether too large to be kept in so small an office.

Don Quevedo advises physicians to get in debt to everybody, as then everybody must employ them to save their debts. But, said the speaker, it is doubtful if all these genteel modes of quackery have not been already overdone. The policy of being called out of church no longer avails. Managing on Sabbath morning to meet the stream of churchgoers, probably, does not pay for horse-hire. "Give me all the fools for patients," said a mountebank to Radeliffe, "and you may take the rest," but the majority of the fools has been sadly diminished of late. Honesty in getting into practice is the best policy after all, though where they had no free schools, no free academies, no free libraries, and no daily newspapers, it may have been different. People love to be cheated, but not by a simpleton. They are willing to be deceived, but it must be by one who has the appearance of an honest and talented man.

People refer us, said the doctor, to the wealth that quackery has amassed in this city, and the fortunes that patent pill-peddling has made here. And many think they need only turn quacks to become rich. But we hear only of the successful efforts of quackery; we see only the successful ones, the great crowd fail utterly and are unnoticed. Vastly the majority never emerge from the obscurity with which a kind Providence is pleased to invest their wicked and false pretences. Hundreds start new infallible pills and panaceal syrups, but those who make money on them are scant tens. We see and hear of the inordinate sale of the successful one, and judge without a warrant that such is the history of all. But inquire of the apothecaries at the end of the year, for nine out of ten of the medical miracles for incurable diseases started during it, and they do not recognize them except as the almost forgotten name of humbugs that were widely advertised for a month, and then heard of no more. How many thoroughly-recognized quacks ride in your city through a dozen successive years? How many more of them perish—starve out, before they attain to their ill-famed notoriety? For every full-grown, swelling, wealthy quack, who has flourished and fattened on the follies of his fellows, said the lecturer, I think it would not be difficult to show you a dozen broken-down and unsuccessful ones. Or, if you show me many, are they not rather men who had a substantial education, men of talent, ability and energy, but who, lacking honesty, availed themselves unscrupulously of the confidence which the public reposes in their skill to delude them, and reap for themselves an ill-gotten harvest? This at least must be granted, that one needs some other capital than impudence and dishonesty successfully to fleece the public.

He believed, too, that much of the reputation of great and eccentric men which was charged to their eccentricity, was really due to their great worth, though their peculiarities may have lent wings to their fame. It was not Abernethy's bluntness that made him the leader of a school, but his far-reaching discernment, which, classifying his personal observations, developed a sympathy and connection between distant organs that modified, and does to this day, the practice of the world. It was because Mounsey, "the Chelsea doctor," and the friend of Garrick, was possessed of an extraordinary share of common sense, and was a thorough



and practical physician, that he so long ruled the ascendant in his sphere; not because he was possessed of a vitiated taste, neglected his dress, and had the bearing of a boor, and possessed a most mischievous wit, the latter of which he carried into his will, bequeathing his body to the dissectors, his velvet coat to one friend, and the worthless buttons on it to another. It was the skill of Demoulin which made him celebrated, not his well-known miserly habits, of whose fame there was so great a report that one who had been the closest of misers came and offered to sit at his feet and learn economy. Demoulin extinguished the dim candle, remarking, "we need no light to talk of economy by." "Enough," cried the miser, "I have learned my lesson," and departed. It was not Radcliffe's unpardonable rudeness that placed him at the head of his profession, but his acute penetration, his well-digested experience, and his great attainments. Very possibly, that bluntness, well illustrated in the case of that gluttonous dyspeptic whom he advised "to hang himself, since nothing but death could free him from his complaints," might have helped to spread his reputation, and given wings to his really well-merited fame.

It was not the fact that Sir John Elliot painted a death's head on his carriage-door that brought him to the baronetcy, but his abilities, by no means despicable, assisted by his manner, which is said to have been so fascinating that his lady patients were forever falling in love with him. It was not because Sir Richard Jebb was always testy when his patients talked of dieting, and swore vigorously if they insisted on knowing what to eat, telling the honest inquirer that he could eat anything but the poker, which was hard of digestion, and the bellows for an equally good reason; but it was his keenness of perception, his profound learning, and his intelligent earnestness for his patients' recovery, which led the sick king to declare that he would have Jebb and nobody but Jebb, in spite of the etiquette of physicians ordinary and extraordinary.

These eccentricities were spots on the fame of the great. In the greatest we see nothing of them. There was no odor of quackery about the fathers of medical science—none about Linacre, "the purest Latinist of his day"; or Harvey, who, by hard labor, dragged to light that great secret of nature, the circulation of the blood; or the erudite Friend; or the eminent Stahl, whose doctrine of phlogiston, though now exploded, did good service in its day; or practical Sydenham; or religious and quaint Sir Thomas Browne; or Boerhaave, the "Voltaire of Science." There was nothing pretentious or adventitious in the great fame of the witty and benevolent Arbuthnot, of Gregory, or the great Cullen. There was no truthlessness in Denman, Heberden, Hartley, or Jenner whose discovery drove far into the back ground that loathsome disease which at one time was slaying half the people that died on the face of the globe, and would have exterminated it utterly if his successors were possessed of half the earnestness in enforcing vaccination that nerved him to its successful introduction. There was no humbug about our Rush or Colden, Bard or Warren. These were sternly honest men, most of them obliged to cope with poverty and science at the same time.

There was nothing counterfeit in our Physick, our Post, our Godman,

our Hosack. There is nothing like mockery, nothing pretentious in the fame of our Mott or our Francis—names which their contemporaries, envious of posterity, hasten to honor—unwilling to wait the willing years—may they be many yet!—which will promote them to the seats of the Fathers, in which Time makes no further mark, and will nothing detract from their awarded greatness.

Wm. Hunter said that “success in the medical profession always attended the diligent,” and unless there is some grand inequality in the constitution it is true beyond a doubt. He who lets the little tricks go over to quacks, who sticks to his legitimate business, avoids the seductions of the belles-lettres proper, despises the doubtful fees of political places with the promises of politicians, and runs from indolence as from a devil, will certainly succeed. But, said he, suppose quackery were always profitable—there was something besides money worth having, a character which money could not buy. Few professions, said the speaker, offer more liberal rewards to the devoted than medicine. It yields a competence as speedily as most, and in itself has rewards of the highest intellectual kind. It is only the outskirts of the field that had been cultivated; within there is a vast area rich with the unturned mould of centuries. There are mines inexhaustible, into which no shaft has yet been sunk—whole fields, in walking over which the hazel-twigs would perpetually point downwards—close thickets and dense forests, into which the peering eye of man has not yet penetrated, all underlaid with strata of metals; but whether of dark coal alone, or of glittering diamonds, of iron, or of most precious gold, no one has yet announced.

He meets on each new day some new question to be answered—some new problem to be solved. He walks perpetually among a swarm of interrogatories. Every patient's tongue crooks itself into the form of an interrogation point, to which his morning salutation must be a reply. In his troubled dreams points of interrogation bend over his pillow. There is not a phenomenon in nature—there is not a phenomenon in life, but in his eye stoops into its form and humbly begs to be straightened. Every operation of prehension, digestion, assimilation, secretion and excretion, assumes the uniform shape. State any fact in medical philosophy, and as its supplement up starts the interrogation point, asking how to account for it. The facts in philosophy are soon stated and easily learned; but the questions presenting themselves to the intelligent reader are manifold and perpetually recurring.

#### TRAUMATIC TETANUS—USE OF CHLOROFORM—RECOVERY.

BY H. C. MARTENS, M.D., OF ST. LOUIS, MO.

TETANUS seldom ends in recovery. Traumatic tetanus, I believe, still more rarely. Any instance, therefore, in which so desirable a result takes place, is worthy of record, for encouragement and hope, that this formidable malady will eventually become subject to judicious treatment.

Michael McDonald, a vigorous, healthy man, ætas. 30, received a wound over the left eye from a stone hurled at him. A lacerated inci-

sion two inches in length and penetrating to the bone was made, which bled profusely, even to fainting. The wound apparently did well until two weeks afterwards, when, from exposure to cold, slight stiffness of the jaw supervened. The third day after, Sept. 27th, I first saw the patient. The wound over the brow had closed. The muscles of the left cheek and neck were rigid and hard. The jaws were firmly closed, leaving merely a sufficient space to insert a spoon handle.

The treatment was commenced by a free incision through the whole length of the cicatrix, followed by opiates internally and wet cups to nape of neck: these by blisters, several in succession. Deglutition was performed with great difficulty, causing spasm of the muscles of the face, throat and neck, and a distressing pain at the pit of the stomach. The latter symptom continued during a greater part of his illness, aggravated occasionally to agony. The incision over the eye was kept open by the application of caustic potassa. Whilst applying the caustic the patient was seized with a strong convulsion, involving the muscles generally; these convulsions returned at intervals of two to five hours during the first ten days of treatment. On the third day, twelve grains of calomel with opium and tart. ant. in four powders, were ordered, one to be taken every three hours, and also the inhalation of chloroform. Ptyalism supervened. The bowels were kept open by *ol. tigii*. For a week the patient used half an ounce of chloroform daily, inhaling about half a drachm whenever a convulsion was apprehended. The chloroform always controlled the spasm and pain, but never caused narcotism or insensibility. Beef tea was freely used for nourishment.

Under this treatment the rigidity of the jaws began slowly to relax. The inhalation of chloroform was continued for another week in gradually longer intervals. No other treatment. At the expiration of the third week from the first attack the jaws could be freely opened, and the patient was convalescent.

Had the action of mercury any agency in arresting the disease? But twelve grains were administered: yet ptyalism resulted, and thus the whole organism was brought under its control. Or, is the cure to be attributed to the powerful influence of chloroform over the nervous system?

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#### MEDICAL REFORM IN ROCHESTER, N. Y.—NEW FEE BILL.

[Communicated for the Boston Medical and Surgical Journal.]

MESSRS. EDITORS.—From the known reputation of our city for quackery, you will doubtless congratulate us on the prospect of reform. The "regular profession," which is numerous here, is not, perhaps, inferior to that of any western city. We have many honorable and scientific men. But although the profession is free from the imputation of empiricism, we, as well as the community, have been too indulgent towards quackery. It finds here a genial soil, a mild clime and balmy dews; it flourishes with the luxuriance of a tropical flower.

We have, at the present time, three quack "institutions" in full

blast most of the year, though all on the decline. They go by steam, water, caloric, magnetism, "infinitesimal," and divers other species of motive power. Here, too, was the Eden of "spiritual knocking"; and here once flourished an "Eclectic College," which, failing to obtain a charter, disappointed its students of their diplomas, and its professors of their profits; it then removed to Syracuse, N. Y., and from thence, I believe, to oblivion, its permanent location. We have also foreign and native quacks, of all denominations and both sexes. The medical profession, however, is not responsible for this state of things—they have no sympathy with quackery.

A society for the discussion of scientific and medical subjects, has been re-organized, and is attended with interest. A new *fee bill*, with advanced prices, has been adopted; resolutions have been discussed in reference to some decided measures against empiricism—also in relation to the more prompt collection of bills, medical etiquette, sending prescriptions to druggists, &c. A resolution was passed to abide by the rates of our fee bill, uniformly—all violations of the rule being considered unprofessional. The right, however, is reserved, to make deductions in settlement, when necessary—all such deductions being considered as gratuities.

A few of the items of the bill may be mentioned: viz., price of visits in the city, \$1; night visits, \$2 to \$3; consultations in city, \$3 to \$5; obstetric cases, ordinary, \$5 to \$10; venesection, \$1; office prescriptions, \$1 to \$3; surgical operations and other services in proportion. We consider these prices too low; but still, as high as our population will bear at present. Our prices have not advanced at all in proportion to the expenses of living. The main obstacle in the way of fair prices and prompt pay seems to be the legion of quacks, who, in most cases, underbid the profession. Among these are that genteel and respectable class the homœopaths, who practise in some *intensely* respectable families. Here, however, as elsewhere, this system is a mere nullity—as they constantly employ allopathic remedies in large doses. How long will the dear people close their eyes and ears, and run, with their mouths wide open, after quacks and nostrums?

Yours respectfully,

Rochester, N. Y., March 6, 1854.

M. M. RODGERS, M.D.

#### HOMŒOPATHIC INTERFERENCE WITH REGULAR PRACTITIONERS.

[Communicated for the Boston Medical and Surgical Journal.]

MESSRS. EDITORS,—So much has been written upon the claims of homœopathy, as a system adapted to the cure of diseases, the writer will not be surprised if you decline the publication of this communication, unread, when its title attracts your notice. If you will read it, perhaps you may print it, as you will perceive that the repose of either class of combatants in the original battles, as to its superior merits over all other systems, will not be disturbed by its suggestions. The ghost of Hahnemann shall not, at my call, "re-visit the glimpses of the moon," to tes-

tify against his own hypotheses, nor to warn his improving disciples of "the wrath to come," for their practical departures from his specific and immutable laws. I shall not summon the shade of Priessnitz to give reasons for his passing away to the spirit world, before the allotted time of man's earthly pilgrimage, while enjoying and dispensing the life-prolonging powers taught to be infallible by himself and proselytes, in the douche, the plunge, the pack, and sitz. Neither alone, or together, shall these illustrious departed be invoked to question the homœopath of 1854, as to the propriety of the union of the unequal potencies, in the attacks to conquer a cure among the diseased faithful of the hydro- and homœo-pathic doctrines.

The fusion of principles in the popular mongrel practice would seem to be an admission that, singly, neither hydropathy nor homœopathy are to be relied on, as displacing systems, by the professors of either. A poetical extract from "Mother Goose," or some other collection of childish philosophical conclusions, the title of which is forgotten—an omission some juvenile reader may supply, respecting the wise "man in our town," whose eyes being "scratched out" by jumping into a bramble bush, were "scratched in again" by the same process—gives illustration to the theory and practice of homœopathy, and may have been suggestive of the experiment. The optic case, to my knowledge, has never been disputed by any faculty. This nursery classic has been quoted from before.

I have promised not to argue the general question of homœopathy. The proposed subject of attention at this time, is how its doctrines and the practices of the dispensers of its "material aid," should be met by those who style themselves "regular physicians," and who in this State are fellows of the Massachusetts Medical Society.

That the tricks of dishonest medical practitioners, styled homœopaths, fellows or not of the Massachusetts Medical Society, regular graduates of regular medical schools or otherwise, should annoy the honest physician, when the pretender, with a flimsy rhetoric which decorates the specious promise of cure, takes away his patients, is natural enough. The stereotyped vocabulary, used as a means to deceive the unenlightened sufferer, is understood, and need not be repeated. The answer to the prognosis of the new light is the autopsy and the undertaker's bill, after a series of visits, and promises of "getting along," "improving," "very comfortable," "out soon," "not quite so well," "if I had been called sooner," "sure to cure," "doctor's medicine can't be got out," "never lose any if we have them first," "weaker," "failing," "dying," "dead." Funeral talk—"died even though we had Dr. Swashen Water and Dr. Simco Similo three times a-day." These are a part of the sayings, when doctors have disagreed. Every day's experience exhibits the success of some assinine cross between speculator and doctor, of the gulling school, in securing patients, because he is a homœopath, and not for any great share of personal acquirement, judgment or skill in the detection and treatment of disease.

Mesmerizers, Thomsonians, seventh sons, spirit rappers, natural bone-setters, humor killers, hair doctors, corn doctors, water doctors, worm kill-

ers, root and herb doctors, Indian doctors, fit stoppers, fortune tellers, old women salve makers and homœopaths, are sought for by a portion of the public, because they are these things, and vanquish disease in their own peculiar style; and therefore one practitioner of either class is considered about as good as another—a conclusion for the most part not far from correct.

Among what are termed regular practitioners, the public seek those who are men of tried skill, or who have a reputation for that quality, so desirable in any important practice.

It is usual to style regular practitioners allopaths. Without admitting the propriety of the appellation, as applied to all who are not of the list of those inventors detailed above, it may be used as designating the regular opponents of all systems of whimsies, absurdities and crotchets, although individuals among the regulars may have whimsies, absurdities and crotchets of their own, as they apply the principles of what is termed regularly-taught medicine in their own practice.

The public think—that part of it who think at all on the subject—and say, sagely, one party or the other is grievously wrong in this medicine business; and those other parts of the many-headed public who think, as they hear others say they think, repeat the opinion, and thus, snowball fashion, as the ball rolls it aggregates, and a large amount of evidence is accumulated, which if placed in range of common sense attack, would vanish as would the snow fabric exposed to a south wind or drenching rain. Here are two parties; how shall the public judge, if they desire to use judgment in the matter.

Now on what is called the philosophy, theory and practice of Hahnemann's fasciculi of notions and observations, doctors have disagreed in magazines, reviews, lectures, dissertations and talks among themselves, and the parties to these various modes of discussion have wasted much ink, paper, time, words and temper, and are each pretty much where they started from.

The public, mystified with learned phrases, and professional technicalities, have been bewildered. Sick men, women and children have been "made comfortable," "helped," "cured," and have died in many localities and under divers influences. Obscure and semi-obtuse disciples of Galen have changed front, deserted the ranks of the old Gallipot, Phial and Pill-box Company, as practitioners, while they retain and value their social association and membership in State Medical Societies, and with the aid of Hahnemann's thunder, as represented by the pellet, the powder and the drops, allied to the Priessnitz formulæ of water cure, have made themselves rich and famous in common with others originally doctinated with the Hahnemannisms. While we of the old estate, loyal to our belief, grumble, look on, and cry out quackery, charlatanism, humbug, down with the heresy and the cheat, which thrives the while, and will in spite of all means hitherto attempted to restrain it.

At the next annual meeting of the Massachusetts Medical Society a committee will report in relation to the subject of homœopathic practitioners retaining membership in that Society. In time, the report will

be public ; till then, no assumption is to be made of its recommendations. In the meantime, if Fellows of the Society would define their position and let the public be informed of the questions at issue, a separation, if it is to be accomplished, will have a telling force.

To fight homœopathy successfully, if any battle is to be fought, a proposition at this time not to be considered, in the usual form of conflict either with pens or batteries, it must be decided to fight, to conquer something—and not to use the weapons which effect no purpose or wound.

There are differences of opinion among regular practitioners as to the tactics and manœuvering which are best calculated to “carry the war into the enemy’s country,” their patron’s houses, as the enemy has done into the castles of the regulars. This may appear to be no easy task to some ; to others, daily duties afford daily demonstrations of the ways by which all irregular practitioners may be in some degree checked and exposed.

It is proposed, if I am correctly informed, to class homœopaths with irregular practitioners ; to deny to them the privileges of the Massachusetts Medical Society and to refuse consultation with them, and never to give them aid in the cases confessedly beyond the power of either their theory or practice. Scrupulously carried out by all the members of the medical profession, the public being made to understand the matter, this action would do something with a class who think, and are suffering from real disease. But humanity forbids. To leave a sufferer, who may be benefited by real treatment, to his agony, because, unconsciously perhaps, he has been deceived by ignorant, designing or chimerical adventurers in the healing art, is not characteristic of the true physician or surgeon : and even if too late to relieve, the trial must be made. There are other lesser though not less effective ways of reaching the vital points of the new doctrine, which are reserved for discussion at some future time.

The paying part of all “outside practice” is the treatment of the chronic, the incurable, and the imaginary diseases. When the regular has given up the case, all promissors of cures, in succession, are employed ; and against the prophecy of the regulars, sometimes a cure occurs. Intelligent physicians know, and their knowledge is sustained by homœopathic experiment, what class of cases suits exactly this expectancy of cure, which time and certain conditions warrant without the use of drugs. But this knowledge is the consequence of scientific observation, which few of the laity possess. Physicians may argue against cures by homœopathic or any other medical treatment, as much as they will ; the public judge of facts, or what they suppose to be facts.

Sick people will lose confidence in a medical attendant—it may be from caprice—and a change of practitioners, after trial, involves only the question of personal confidence, not the reputation of doctrines presumed to be sound. But when a system is abandoned, it suggests the belief of failure in its principles, rather than the vaunts of imaginary powers in the novelty offered in its stead. It is notorious that the services of the best physicians are dispensed with in many families, and in their stead, hydro-homœo- and other paths are employed. It is the system, not the practitioner, that is “tabooed,” to use a common though perhaps not appropriate term.



Now if the "sick" public and their "well" friends will decide which form of treatment they will undergo or recommend, why should not the regular physician, in whom personally "they have great confidence," prescribe according to their wishes, from the *Organon of Hahnemann*, the *Manuel of Jahr*, or "*Guenther's Doses for Domestic Animals*" if they prefer that to any of the others?

That some physicians act upon this principle, is well known amongst us; and it is no rare event of medical practice in some "rides" to have one member of a family under treatment by what is termed an allopathic physician, while one or more are "put through" on the homœopathic system by the same party. The patient submitting to each may say, with the great Cato—

"My bane and antidote are both before me."

Two questions are proposed to persons who may be disposed to answer them. What rule of medical ethics is violated if the physician, Fellow of the Massachusetts Medical Society, dispenses homœopathic medicines to his patient when he desires it, and when from any cause in his own judgment that kind of medication will be just as beneficial as any other? Second, what would be the proper action of the Massachusetts Medical Society, should they deny fellowship to homœopaths, when a Fellow, practising as a regular physician according to his judgment, departs from established formulæ, and gives "nux," "ipecac." or "calomel" after Hahnemann's directions, in all their potency, danger and curative peculiarities?

I do not know if these questions will be answered. Homœopathic practitioners will not probably notice them. Anecdote and personal reminiscence are of no weight in deciding a question of principle, and the "tricks of trade" resorted to by some practitioners of homœopathy should not be pressed upon its theories or the practice of its honest disciples.

Some of the laity are yet of the opinion of the majority of educated physicians throughout the world. To these reasoners the Hahnemanism is so monstrous a mouse in its absurdity, that they are prepared to believe it will require monstrous effects and supernatural evidences of superiority, with a soil of mental recipiency in which credulity is a principal element, ere it will displace legitimate medicine and thrive long in any land where a square is known from a circle, or incandescent iron from a block of ice.

Yet this *ism* has, in consequence of its foreign prestige and associations, made greater inroads upon some branches of medical practice, than any other of the exploded theories buried in the grave of the past; and to which sepulchre of things forgotten, this pathy will in good time be committed. This is the first attempt on a grand scale of educated charlatanism. Real doctors sustain its doctrines and practise upon their teachings; and wealthy addle brains and their humble followers patronize the experiment and pay the bills. Physicians of eminence, with some exceptions, while opposing the doctrines of Hahnemann have by their actions aided in the obtrusion and acceptance of homœopathy among what is termed the better classes of society. Medical science has not



suffered, but individuals have, by the advent of the German legion among us.

In the keeping of the coming men of the profession are the truths of medicine. To them is confided the duty of preserving the honor of the followers of an honorable art. These men are forming their plans for a future; to them this communication is directed. Elder soldiers, or, perhaps, better, may read; their plans are formed, their reputations made, their practice is remunerative, their action conservative. They will not change their opinions in tactics in accordance with the changes constantly at work in a progressive age. Some of these Nestors will write ponderous articles in American or foreign reviews, which will be read with great pleasure by kindred spirits, and talked of by obsequious satellites. These will be alluded to in journals devoted to medical science, of lesser calibre and dimensions, and pointed at as specimens of scientific artillery, which is to demolish and destroy the arch enemy (in the regular camp), who will never feel the weight of the battery pointed at his walls, but will gain confidence by the apparent size of the guns it is thought necessary to open upon him.

It will be perceived that the writer is not of the school of Hahnemann or Priessnitz; yet he holds to the doctrine that any person has the right to practise medicine after any method he pleases, and that any person has the right to employ whomsoever he pleases to drug him to the death or to cure him with no drug at all.

If homœopathy seeks to supplant rational medicine, its opponents should give it a fair field before the public, opposing it in act as well as name—and endeavor so to draw the line of actual practice that the public who are to offer the victims to the experiment shall understand the chances on either side, and so act that fair dealing, as the world weighs such matters, may be distinguished from false pretences.

March, 1854.

Yours respectfully, H. COCLES.

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#### DR. DEANE ON FRACTURES OF THE FEMUR.

[Concluded from page 115.]

THE indications of treatment in simple fractures of the femur consist merely in preventing motion at the seat of injury, in restraining muscular action, and in preserving the axis of the bone. To fulfil these indications successfully and without pain, is to attain high perfection in mechanical surgery. Still it is possible; not, however, by the inclined plane, for it does not maintain the axis of the bone, nor prevent motion at the seat of fracture; nor yet by antagonistic forces, for contractions, excoriations, displacements, local suffering and constitutional re-action are the certain concomitants. But it is to be accomplished by surrounding the leg with a firm, elastic covering, and then fixing it immovably to the body; to make the leg and body, so to speak, one immovable member.

The first consideration in this treatment, and not the least important, is the bed whereon the subject is to complete the period of cure. It should, if possible, consist of a good mattress, or some substitute that

will keep level and firm, or the nates will sink and drag down the upper portion of the fractured bone, and disturb its axis. For children, I have often found a common dining table covered with folded quilts to afford superior accommodations. To steady the thigh, especially the upper fragment of the bone, a long splint is indispensable, and upon the general pressure principle, it should be so excavated as to fit with entire accuracy the hip, thigh and leg, instead of being perfectly straight and touching at distinct points only. This modification of the long splint is of manifest importance; if it be so hollowed out as to conform to the inequalities of the limb and to embrace its outer half, it becomes a powerful instrument for maintaining the integrity of the thigh, and its application imparts to the patient sensations of comfortable support. It is necessary it should be constructed at the bed-side, and fitted by constant trials until it touches every part of the limb by a uniform degree of pressure. When its inner surface is thus completed, the redundant parts are to be cut away, until it is reduced to a thin elastic shell, an exact counterpart of the outer surface of the leg. Its construction requires a little patience and ingenuity, but nearly all the labor of the treatment is condensed into its preparation. It should be lined with a layer of soft cotton flannel and applied to the leg. Its upper extremity is received into the pocket of a stout broad belt, and securely buckled to the body. It is also to be buckled to the thigh and leg, the inner half of these members being previously protected by binder's board accurately moulded and lined with flannel. The thigh and leg are consequently enclosed in a slight elastic apparatus that positively prevents motion and muscular contraction, and imparts universal support; and being bound to the body, efficiently maintains the position of the limb. It is impossible that displacement can happen when muscular irritation is subdued by genial pressure, when the limb is securely guarded, and its movements governed by a contrivance so simple, so efficient and yet so agreeable to the patient. The general support of this application dispenses with the necessity of bandages; it can be removed with facility and the limb opened to inspection. Nothing affords more comfort to the patient than the frequent removal and re-adjustment of splints, while it gives to the physician the opportunity to satisfy himself if all be right. The brief removal of these splints is not attended with retraction, and the limb can therefore at all times receive attention without any fear of this accident.

In children, women, and in men of slight muscular development, no extension is required beyond the gentle and occasional effort of drawing down the foot by the hand of an assistant. This method of extension will succeed in the most powerful men when the entire surface of the limb is supported by diffused pressure, for all tendency to muscular spasm is very nearly destroyed; still, when the fracture is in the upper third of the femur, it may be convenient to adopt permanent extension, and I know of but one principle that is philosophical in its application while it is also agreeable to the patient, and that is to attach a weight to the limb and tire out the refractory muscles by the ceaseless power of gravitation. The weight should be attached to the foot by a gaiter and cord, running

in the direction of the axis of the leg over a pulley. This is *perpetual* extension; it requires for counter resistance only the weight of the body; its power never ceases, it accommodates itself to all movements of the body, it is painless, and it is efficient.

Such is a brief outline of the modified plan I have adopted for treating simple fractures of the thigh; and its utility, I think, cannot be impeached. It commends itself by its simplicity, its freedom from pain, and the remarkable power it exerts over muscular contraction. Muscular contraction is irresistibly silenced by uniform compression, and if we but add such additional aid as will maintain the natural posture of the limb, success is sure. The great danger in the treatment of fractures consists in doing too much, in losing sight of rational principles of practice, and being blinded by the conceptions of specious and complex machinery. In the numerous instances I have adopted the principle of compression, there has been no failure of success. I have adopted it in individuals of all ages, from 90 years down to 8 months, and the following is a case:—A little child carrying a nursing infant fell and fractured one of its thighs. It was rather difficult to decide upon the best method of overcoming motion of the injured limb, for that of placing so young a thing upon its back was evidently impracticable. But the following expedient succeeded. Carved splints were applied to the outer side of *both* legs, and thin sheets of gutta serena adjusted to the inner. The splints were firmly bound to the body, above the hips, and the legs confined to each other, which effectually checked all motion. The child was then placed upon a pillow, and in this way, with the attentions of a judicious mother, a speedy and successful cure was accomplished. I succeeded in another child of 18 months, in his cot, upon the same plan.

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## THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, MARCH 15, 1854.

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*Rheumatism, Gout and Sciatica.*—Living in an age of progress, it is very natural that inquiries in regard to new modes of alleviating human aches and pains should have a prominent place among the studies of medical men. Very few have the courage to grapple with obscure maladies, any more than they would with difficult problems in mathematics or old abuses in government. Occasionally, however, a man appears who has the resolution to take a bold stand, and make himself known, sometimes in one thing, and sometimes in another; and whatever he does, is acknowledged to be progress. Now in medicine, the stand-stills—those who only copy the thoughts and suggestions of others, and who are particularly guarded that no act of theirs should produce even a vibration not in exact accordance with the highest order of propriety—invariably sound an alarm when a new idea or new mode of treatment is presented. They dread innovation, which is called revolution if it indicates progress. It would be very agreeable to pursue this train of remark, were it not diverting us from a book that has been some days under consideration, and which really had an influence in

calling up the foregoing thoughts. Messrs. S. P. & Wm. Wood, 261 Pearl street, New York, have published a treatise on "Rheumatism, Rheumatic Gout and Sciatica; their Pathology, Symptoms and Treatment," by Henry William Fuller, M.D., of St. George's Hospital, London. This work possesses eminent claims to the attention of the medical practitioners of the United States. Rheumatism is as common as the changes of weather in our Northern clime. It is familiar to youth and age. The man in the ditch, and the capitalist who rides in his own coach, enveloped in fur, are alike groaning, at times, with its attacks. Young ladies, and those arrived at mature age, complain bitterly of rheumatism, when they can think of no other name for a disease that may be causing them discomfort. Rheumatism attacks every part of the body. One day it is in a leg, the next in an arm, and then again away it goes, with the momentum of a fly-away-Jack, to fasten on another part—perhaps in the head or the heart. In short, an ailment of more universal notoriety, or ubiquity in character, could not be mentioned. All this while every body has a specific remedy, yet few are ever cured. Here is a scientific work, from a responsible source, the production of a man who has both seen and studied the phases of the malady. It is a well-proportioned octavo, containing 322 pages, divided into thirteen chapters. The first is a general comment on the supposed causes, which is a learned and truly sensible dissertation. The next is devoted to the rheumatic diathesis; the third to the seat; the fourth to acute rheumatism, &c., till, in the end, every variety and form in which the aches and pains are recognized are minutely analyzed, and remedies proposed, varying with the ever varying condition of the sufferer. On the whole, this volume makes its appearance at a favorable moment. No other author on this subject happens to be in the way, and this must become authority to the medical faculty, and a guide and counsellor for the physician in the treatment of the gouty and the rheumatic.

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*Hydro-Electric Voltaic Chains.*—An opportunity has lately been afforded us to witness the effects of Dr. Pulvermacher's "Hydro-Electric Voltaic Chains," and we freely acknowledge that the power manifested by them was beyond our expectation. We never had any confidence in the boasted curative powers of "magnetic rings," "bands," "belts," &c., and supposed the chains of Dr. P. were of a similar character, and should be classified among the many medical "clap-traps" which are advertised in the public journals. We were happily disappointed in finding that they do not belong to this category, and we fully believe them to be capable of rendering the greatest good in certain forms of disordered action. Dr. B. S. Codman, No. 43 Tremont st., is the Boston agent for the sale of them.

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*Croup.*—A correspondent in New York, gives the following synopsis of his treatment of croup.

"In cases of membranous croup, the treatment is simple—and efficacious if the disease be taken in season. Where the symptoms are threatening, calomel is the sheet anchor—in doses of five or ten grains, repeated, until the disease begins to yield. Added to this, as a means of relief, an atmosphere of *vapor* has been found most valuable. A sauce-pan, holding two or three quarts, is prepared with a tube one inch in diameter, from the top of the lid, and three or four feet long; this being kept boiling, pours a constant current of steam into the room. If this does not afford relief, an elbow

is added, and another length of tube : the patient is surrounded by blankets, forming a close tent round the bed, and the end of the tube pours the vapor into this tent. Care should be taken to keep the end raised, as the steam condenses in the tube and the water sometimes falls on the patient. Immediate and sensible relief often follows this close application of the vapor, which may be diminished as the patient improves—though the atmosphere of the room should still be kept moist during recovery. As an extempore apparatus, a tea-kettle serves very well, taking care not to have it full above the opening of the spout."

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*Death of a Medical Student—Poisoning during an Autopsy.*—Mr. John V. Miller, a medical student in Harvard University, died last week in consequence of a slight wound, made while engaged in a post-mortem examination. The deceased is said to have been a young man of most amiable qualities and studious habits. Our advice to those who wound themselves in making autopsies, is never to cauterize the wound, but immediately to draw blood from the part by suction; and the instrument best adapted for this purpose, is the mouth.

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*Transactions of the American Medical Association.*—Volume VI. of this publication, to which we have before alluded, is of rare value to the American medical brotherhood. It is being distributed, and those who have not yet ordered a copy, should do so before it is too late. It is gratifying to see the display of native talent in these transactions. The typographical execution of the work is excellent, and admirably corresponds with the spirit and matter of the publication. In order to keep up with the history of medicine in our own country, this is the book to have in a library.

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*Sickness of M. Roux, of Paris.*—Our correspondent at Paris gives the following information, which will be received everywhere with regret, respecting the sudden attack, by sickness, of one of the chief surgeons of that city.

"On Saturday evening, January 28th, M. Roux, the venerable surgeon of Hotel Dieu, had an attack of apoplexy. When taken ill, he was shaving himself to go to the ball of Hotel de Ville. He is now better. Whether he will entirely recover, so as to resume his duties, I cannot now say. He would be a loss to the profession. He has in preparation a medical work comprising four volumes—the results of forty years' practice. Such a work would be a valuable acquisition to medical literature."

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*Recommendations of Quacks and Quack Medicines.*—Physicians, more particularly those of eminence, whose names are seen attached to certificates, in the advertisements of quacks and the venders of nostrums, should not be condemned unheard. The following letter from Dr. Mott, of New York, to the editor of the Ohio Medical and Surgical Journal, shows that his name has been used without his permission; and the instance to which he alludes, is that referred to by our Portland correspondent in this Journal of Sept. 7th, 1853. It will be recollected that Prof. Silliman, of New Haven, has had similar cause of complaint. A letter from him, stating that his name had been fraudulently used in connection with a celebrated nostrum, was published in this Journal a few years since. It is time that

a stop was put to such nefarious proceedings, and we are glad to see the parties who have suffered in this way come out and expose the guilty ones. The following is Prof. Mott's letter:—

"Sir,—Will you be so kind as to correct a misstatement in the November number of the Ohio Medical and Surgical Journal, of which you are editor. I never recommended Dr. Hartly as an oculist or curist. If he refers to me, therefore, it is wholly unauthorized.

"In various directions of our country, I find myself set forth in connection with pills, powders, and balsams, which I know as much of as I do of Dr. Hartly as an oculist."

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*Medical School of Harvard University.*—At the semi-annual examination held March 1st, 1854, the following candidates were examined and approved for the Medical Degree.

Horatio Nelson Ballard, A.B., *Thompson, Ct.* Subject of thesis, Dysentery.

John Blackmer, Jr., *Plymouth.* Colica Pictorum.

William Gilman Breck, *Springfield.* Biliary Concretions.

John Freeman Butler, *Marlow, N. H.* Hypochondriasis.

Charles Marcellus Chandler, *Tunbridge, Vt.* Apoplexy.

David Choate, Jr., *Essex.* Croup.

Joaquim Barbosa Cordeiro, *Ceara, Brazil.* Diarrhœa.

William Glenn David, A.B., *Amherst, N. H.* Typhoid Fever.

Thomas Sylvester Fellows, A.B., *Gilmanton, N. H.* Pleurisy.

Dana Warren Hartshorn, *Walpole.* Erysipelas.

Elisha Hopkins, Jr., *Carmel, Me.* Pneumonia.

Francis Augustine Howe, *Harvard.* Acute Inflammation of the Serous Membranes.

George Marshall Howe, *Sudbury.* Opium.

Woodbridge Ruggles Howes, *Rochester.* Bloodletting.

George Washington Jencks, A.B., *Woonsocket, R. I.* Dysentery.

Thomas Leighton Jenks, *Boston.* Syphilis.

Thomas Mathewson, *Chepachet, R. I.* Croup.

George Alexander Morgan, *Lancaster, Pa.* Diseases of the Liver.

George Johnson Newton, *Worcester.* Pleurisy.

Edward Augustus Perkins, *Topsfield.* The Agency of the Mind in causing Disease.

Henry Shaw, *Sudbury.* Typhoid Fever.

Israel Tisdale Talbot, *Boston.* Paraplegia.

Leonidas Franklin Wilbur, *Boston.* Belladonna.

In addition to the above, the following were previously examined and passed, viz., Win. Tyng Smith Brackett, *Edgartown* (Typhoid Fever), John Lane White, *Watertown, N. Y.* (Dysentery), on the 31st of December, 1853; and Samuel Abbott Green, A.B., *Groton* (Hydrophobia), on the 2d of February, 1854. J. B. S. JACKSON, M.D., *Dean of the Faculty.*

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*Law in Massachusetts respecting the Collection of Medical Fees.*—The following notice from the Boston "Post," of two suits at law, which rather remarkably came before the court on the same day, is worth preserving. It shows that our Juries consider the "laborer worthy of his hire," yet that in some cases small fees as well as small doses are thought sufficient.

"Court of Common Pleas, Friday, before Wells, C. J. No. 577, Thomas

H. Pinkerton vs. Ann Kinsley, Administratrix, verdict for plaintiff \$83 33. No. 582, Charles F. Hoffendahl vs. Lewis Hanson, verdict for plaintiff \$1. These two cases were for medical services, the first a mesmeric practitioner, the other a homœopathic physician. The claim in the first was resisted on the ground that the plaintiff, not being a regular physician, was not entitled to recover. It was shown, however, that a large number of visits were made, and the plaintiff was put to an expense as well as the employment of his time, upon which the Court held, that if the parties employed him from choice, and with a full knowledge of his professional character, he was entitled to recover. In the case of Dr. Hoffendahl, it was shown that twenty-seven visits were made, for the payment of which he had received \$24, and payment of the balance of the claim was resisted on the ground of the poverty of the defendant, and his taking the poor debtor's oath. Drs. Blake and Clark, introduced as experts, stated that the lowest charge of physicians was \$1, the last adding that in case of poor people, half a dollar was received, the deduction being considered a gift."

*Massachusetts College of Pharmacy.*—The Massachusetts College of Pharmacy held its annual meeting in this city on the 6th inst., at the College in Phillips Place. Daniel Henchman presided. The attendance was large, and the proceedings were of interest.

The following officers were elected for the ensuing year :—

Daniel Henchman, President. Samuel M. Colcord, First Vice President. Joseph T. Brown, Second Vice President. Joseph Burnett, Corresponding Secretary. Henry W. Lincoln, Recording Secretary. Ashel Boyden, Treasurer. Thomas Farrington, Auditor. Thomas Hollis, Samuel N. Brewer, Charles H. Atwood, Andrew Geyer, Atherton T. Brown, Thomas Restieaux, Samuel H. Woods, Henry D. Fowle, Trustees.

Many subjects of importance were discussed by the members. In consequence of an unusually large amount of business it was found necessary, at a late hour, to adjourn to meet again three weeks from date.

*Medical Miscellany.*—There are a number of cases of smallpox at Canton, in this State.—19 gentlemen had the degree of D.D.S. (doctor in dental surgery) conferred upon them last week in Philadelphia.—95 gentlemen were graduated at three of the medical Schools in Philadelphia, last week.—Out of 484 deaths in New York last week, 63 died from consumption and 27 from smallpox.—Dr. Maltby Strong has been elected Mayor of Rochester, N. Y.—There are several cases of varioloid in this city.

TO CORRESPONDENTS.—The following papers have been received : The Circulation of the Blood—an elaborate and ably-written article, for the first part of which we shall endeavor to find room next week. A voluminous package from our Parisian correspondent, the publication of which must extend through several numbers of the Journal. Scirrhus of the Breast ; Smallpox in Belfast, Me. ; Glucosis—its Treatment ; Alcoholic Liquors in the Practice of Medicine.

DIED.—At Andover, of consumption, Dr. Samuel Johnson, aged 54.

*Deaths in Boston* for the week ending Saturday noon, March 11th, 81. Males 40—females, 41. Accident, 1—apoplexy, 2—congestion of the brain, 2—disease of the brain, 1—inflammation of the brain, 1—burus, 1—consumption, 16—convulsions, 3—croup, 4—diarrhœa, 1—dropsy, 2—dropsy in the head, 2—scarlet fever, 5—gravel, 1—disease of the heart, 1—hernia, 1—intemperance, 2—infantile, 4—inflammation of the lungs, 9—disease of the liver, 2—marasmus, 2—measles, 10—old age, 1—palsy, 1—puerperal, 1—scrofula, 1—teething, 1—tumor, 1—worms, 1—unknown, 1.

Under 5 years, 40—between 5 and 20 years, 6—between 20 and 40 years, 16—between 40 and 60 years, 9—above 60 years, 10. Born in the United States, 60—Ireland, 18—British Provinces, 1—England, 1—Germany, 1. The above includes 6 deaths in the City Institutions.

[Dr. C. W. Parsons, of Providence, R. I., gives an interesting abstract of the deaths and their causes in that city, during the twelve years ending in December last. We have condensed it in the following extracts.]

*Mortality of Providence.*—Four years ago, a summary appeared of the recorded interments in Providence for the eight preceding years. The system of registration has now been in pretty complete operation about half as long again as it had been then; and we have the records of twelve years before us.

The reported interments in Providence in the years 1842 to 1853 inclusive, are 10,323:—viz., in 1842, 602; 1843, 663; 1844, 673; 1845, 763; 1846, 881; 1847, 955; 1848, 927; 1849, 1139; 1850, 878; 1851, 924; 1852, 914; 1853, 1004. The unusually large number of interments in the year 1849 was connected with the epidemic of cholera; and the small number in 1850 may be accounted for, in part, by the fact that this epidemic had exhausted a large amount of the material on which other diseases would have fed. Of these burials, 9968 were of persons who had been born alive.

Two numberings of the people have been made within this period—in 1845 and 1850. The proportion of recorded deaths to population was in 1845, one death in every forty-four inhabitants; in 1850, one to every fifty inhabitants. The years of these enumerations were equally distant from the middle of our whole period; and if we can assume that the mean between these two enumerations represents the average population of the city for the whole twelve years, then the average mortality in a year was about one death for every forty-six inhabitants.

The ages of those who died were as follows:—

Under 1 year . . . . .	1,855	From 40 to 50 years . . . . .	679
From 1 to 2 years . . . . .	1,318	50 to 60 " . . . . .	503
2 to 5 " . . . . .	1,082	60 to 70 " . . . . .	480
5 to 10 " . . . . .	516	70 to 80 " . . . . .	393
10 to 21 " . . . . .	611	80 to 90 " . . . . .	232
21 to 30 " . . . . .	1,020	90 to 100 " . . . . .	44
30 to 40 " . . . . .	931	At 100 or over . . . . .	4

The deaths under one year old are not quite one-fifth of the whole number (19.2 per cent). Those under two years are nearly one-third, (32.8 per cent). Those under ten years are not quite half of all. The proportion of infantile mortality to the whole number of deaths is less in the last than in the first part of the whole period.

The proportionate mortality among the colored is greater than among the white population, nearly in the ratio of 8 to 5.

Of the 9668 deaths, 8794 have some assigned cause. Consumption is charged with 1823 deaths, or 18.9 per cent., nearly one-fifth of the whole. Inflammation of the brain and hydrocephalus, 497; convulsions, 375; inflammation and congestion of the lungs, 381; diseases of digestive organs, 1427; scarlet fever, 413; smallpox, 47; continued fevers, 373; hydrophobia, 2; drowning, 119; burns and scalds, 48; suicide, 25.

*Graduates of the Female Medical College in Boston.*—On Friday, March 3d, the following persons received the degree of M.D.:—Sophronia Fletcher, Lowell; thesis, insanity. Lucy H. Harris, Waterville, Me.; thesis, hemorrhage. Mary K. Jenks, Springfield; thesis, parturition. Martha N. Thurston, Lowell; thesis, cholera infantum.